21503 60168	37194 3		State of Nebraska Investigator's Motor Vehicle Accident Report Sheet 1 of 2														2
1	Total Number Local No./ District 199 Agency Case B5-0849				5-08/107					HIT & RUI	_	INVESTIGATION MADE AT SCENE?					
A/1	of Vehi		199 Case No. B5-084974					YES (In Militar					STATE US	YES		NO	1
01	OF ACCIDENT		3/2015 S M T W				WTH	TH F S TIME OF 1603				nary rime)					
A/2		POLICE 1603															
	PLACE OF	COUNTY	Lancaster					NOTIFIED			1003	09/13/2015					
В	ACCIDENT	CITY	Lincoln					PRIVATE PROPER				VATE YES NO DPERTY? X LATITUDE					
79 c	ROAD O		ICH STREET/ NO NEBRASKA HIGHWAY 2														
1	DISTANCE	FROM					т	HIGHWAY NO. 2				LONGITUDE					
D	MILEPOST MILEPOST						IF NOT AT INTERSECTION										
2						MILES	N S	Е	·				IDGE, RAILROAD CROSSING				
V1/M					25.00	5.00 X PINE LAKE R TS, INDICATE DISTANCE FROM NEAREST TOWN						D					
10	MILES		N S E	w AND	VAS OUTSI	IDE CITY L	IMITS, IN	w OF	NEAREST	Γ	ROM NEAF	REST TOWN					-
V2/M				MILES				CI	TY OR TOV	۷N							
E	R. WORK ZONE		R2 R3 R4	S. PEDES	TRIAN SIFICATION	S1 S2	S3	S4 S5	-a S5-b	S6-a	a S6-b		ACCIDENT INVOLVE DAMAGE TO E DEPT. OF ROADS' PROPERTY?				
2	CODES	1		CODES								○YE	s 🗴	ON C			
F	DDI//ED					\	/EHICLE	NO. 1				07475	1				
1	DRIVER LICENSE		_{NO.} H1334	5907								STATE (Of License)	NE			> FEMALE > MALE	
V1/N	CHRIST	ОРН	PHONE LOCAL NO. 402-853-4147														
1 V2/N	DRIVER ADDRI		ST, LINCOLN, NE 68506 DATE OF BIRTH 02/04/1992								V1/1						
V2/IN	OWNER		PHONE LOCAL NO.														
G	OWNER ADDR		ER A WEBB 402-853-4147 V1/2 CITY, STATE, ZIP CITATION X YES CITATION NO. 08								$-\frac{100}{08}$						
4	4017 S 54TH ST, LINCOLN, NE 68506 PENDING NO LB484169									V1/3							
Н	LICENSE PLATE	MC	NO. TMP834	1						(Pla	YEAR ate Expires)	2016		(Of P		NE	
3	VEHICLE		YEAR 2009	MAKE Yamaha		YZFR6	RACE	BODY ST		8 d	color li black		STIMATED I		Ε		V1/4
V1/O 4	VEHICLE ID	Т	INSURANCE COMPANY								V1/5						
V2/O	NO. (VIN) TOWED TO TOWED BY									POLICY NO).	NOR	0				
							/FUICL F	- NO 2			5860	39001					V1/6 55
1	DRIVER						/EHICLE	: NO. 2				STATE		-	x S	FEMALE	
V1/P	LICENSE DRIVER		NO.						PHONE			(Of License)	LOCAL N		<u> </u>	MALE	_
1	DD1/FD 4 DD0																V2/1
V2/P	DRIVER ADDRI	E55	CITY, STATE, ZIP					DATE BIR (MM / DD					I ****				
	OWNER								PHONE				LOCAL N	0.			- V2/2
^ງ 01	OWNER ADDR	ADDRESS CITY, STATE, ZIP					CITATION					CITATION	NO.			V2/3	
V1/Q	LICENSE										PENDI YEAR	NG NO		STA	TE		V2/4
1	PLATE	YEAR	NO.	MAKE	M	1ODEL		BODY ST	YLE	(Pla	ate Expires)	E	STIMATED I	(Of P	′		V2/4
V2/Q	VEHICLE												TOTALE				V2/5
К	VEHICLE ID NO. (VIN)							INSURANCE				<u>_</u>					1 10 10
01	TOWED TO		TOWED BY					POLICY NO.).					V2/6
		Comp	lete this s	ection for	r all inju	ured pe	ersons				DATE	OF BIRTH	1 Coat	2	3 Dody	4	5 rans. M F
(Complete a continuation report, if more than three were injured) VEH. # NAME ADDRESS Seat Position Eject Body Region Injury Transport Sev. Transport Transpo																	
4	CHRISTOPHER A WEBB 4017 S. 54TH ST, LINCOLN, NE 68506 02/04/1992 01 3 07 3									3 3	3 M						
1	LOCAL NO. MEDICAL FACILITY NAME BryanLGH Medical Center West (Lincoln General) EMS SERVICE NAME EMS RUN REPORT NO							ORT NO.									
VEH. #	NAME ADDRESS																
	LOCAL NO.		MEDICAL FACILITY	NAME			EMS SI	ERVICE NA	ME				EMS RU	N REP	ORT NO.		
VEH. #	NAME			AD	DRESS												
	LOCAL NO.		MEDICAL FACILITY NAME					EMS SERVICE NAME					EMS RUN REPORT NO.				

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS								
THE TOLLOWING	INDICATE BY DIAGRAM WHAT HAPP	FNFD AGENO	AGENCY CASE NO. B5-084974					
()		Б3-	004974					
Indicate North								
by Arrow								
		, 172ft						
		// // ///						
		/ Ashbrook Dr.						
	Sen	,						
Highway 2								
POI#1: 125' east of t	he east curb of							
Pine Lake Rd./b' nor curb of High								
		115ft						
NOT TO SCALE	Pine Lake Rd.	<u>`</u> .						
DESCRIPT	ON OF ACCIDENT BASED ON OFFICER'S IN	/ESTIGATION						
OBJECT DAMAGED OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE-					
OBJECT DAMAGED OWNER NAME OWNER NAME	ADDRESS ADDRESS	PHONE	APPROX. COST OF DAMAGE \$ PHONE					
JENELLE C ROCK (01-03-1975) 6168 GL NAME TAMI C NORDMAN (12-12-1980) 7626 D		526	402-770-9939 PHONE					
TAMI C NORDMAN (12-12-1980) 7626 D			402-617-2641					
VEHICLE MOVEMENT POINT OF IMPA BEFORE COLLISION MOST DAMAGI		RESTRAINT USE VEHICLE 1	TOTAL VEH 1 1 VEH 2					
VEH NO. N S E W ROAD OR (Enter numbers for	each vehicle)		ALCOHOL Driver Driver Pedes- TESTING No. 1 No. 2 trian					
1 X NEBRASKA HII VEHICLE 1	VEHICLE 2 5	7	ALCOHOL Y Y Y					
MOST MOST	OINT OF IMPACT 1 Deployed - front 2 Deployed - side	None used - vehicle occupant Lap & shoulder belt used Shoulder belt only used	LEVEL TESTED N X N N					
07 Making U-turn AREA 08 Entering	AREA 4 Not deployed 5 Not applicable/ No airbag available	Lap belt only used Child safety seat used Child booster seat used DOT approved helmet used	ALCOHOL/ DRUGS 1 Driver No. 1 No. 2					
01 Essentially 09 Leaving straight ahead traffic lane 09 Top & windows 10 Undergariage 24	7 6 Unknown	3 Costume helmet used 3 Restraint use unknown VEHICLE 2	SUSPECTED ' 1 Neither alcohol nor drugs suspected					
03 Changing lanes 11 Slowing or 04 Overtaking/ Passing 12 Other 11 Total (all areas) 12 Other 08	05 VERICLE 2	-	Yes - alcohol suspected Yes - drugs suspected Yes - alcohol & drugs suspected Unknown					
05 Turning right 13 Unknown OFFICER NO. TROOP/ 1513 TROOP/ BEAT 5	DEPARTMENT Lincoln Police Department		Photographs YES taken? NO					
INVESTIGATOR NAME (Print or Type) Curtis Wolbert	INVESTIGATOR SIGNATURE Approved by Officer Curtis Wolber	rt	DATE OF REPORT 09/13/2015					